

## KENTUCKY LEGISLATIVE ETHICS COMMISSION

FEB - 7 2005

(2/99)

## STATEMENT OF FINANCIAL DISCLOSURE (KRS 6.787)

To be filed by: All members of the General Assembly, all candidates and nominees for election to the General Assembly, and major management personnel in the legislative branch of state government.

☐ Check here and attach additional sheets if necessary. \_\_\_\_ Number of sheets attached.

**Please Include The Following Information For The Preceding Calendar Year:**

Name John A. Arnold, Jr.

Business address 412 N. Main St. Sturgis KY 42459

Business telephone (270)333-4641

Home address 1301 N. Lee St. Sturgis KY 42459

Title of public position, or office sought State Representative-7<sup>th</sup> District

Other occupations of filer Doctor of Chiropractic and farm owner

Occupations of spouse Vice President, Bank Manager

**NOTE: The Following Sections Do Not Require Disclosure Of Specific Dollar Amounts.**

Positions held by filer in any business, partnership, corporation for profit, or corporation not for profit from which the filer receives compensation, and the name of the business, partnership, or corporation Owner-Arnold Chiropractic Center; Owner -Hillcrest Orchard and Farm; Owner-U-STOR-IT Rental Units; Chairman, Kentucky Association of Chiropractors Legal Affairs Committee; Director, United Community Bank of West Kentucky

Positions held by filer's spouse in any business, partnership, corporation for profit, or corporation not for profit from which the filer receives compensation, and the name of the business, partnership, or corporation Vice President, Bank Manager (spouse) United Community Bank of West Kentucky

Names and addresses of all businesses, investments, or securities in which the filer, filer's spouse, or filer's minor children had at any time during the reporting year an interest of \$10,000 at fair market value, or 5% ownership interest or more

U-STOR-IT Rental Units, P.O. Box 124, Sturgis, KY 42459

Hillcrest Orchard & Farm, P.O. Box 124, Sturgis, KY 42459

Arnold Chiropractic Center, P.O. Box 124, Sturgis, KY 42459

United Community Bank of West Kentucky, 1406 N. Main St., Sturgis KY 42459

Integra Bank NA P.O. Box 868, Evansville IN 47705

American Express Retirement Plan (self) 232 N. Main St., Henderson, KY 42420

IRA, (spouse) United Community Bank of West Kentucky, 1406 N Main St. Sturgis, KY 42459

IRA, (spouse) at Hilliard Lyons, P. O. Box 1 Henderson, KY 42420

IRA, (spouse) at Northwestern Mutual, P.O. Box 720 Milwaukee WI 53201-0720

Sources and form of gross income of the filer (list sources by name) \_\_\_\_\_

Income-Arnold Chiropractic Center P.O. Box 124 Sturgis KY 42459

Income-U-STOR-IT Rental Units P.O. Box 124 Sturgis KY 42459

Income-Hillcrest Orchard & Farm P.O. Box 124 Sturgis KY 42459

Income-State Representative, General Assembly Frankfort KY 40601

Interest income bank savings & certificates United Community Bank, Sturgis KY and also  
Integra Bank, NA, Sturgis, KY 42459

Dividend income-Integra Bank, NA, stock, Evansville IN 47705

Sources and form of gross income of the filer's spouse (list sources by name) \_\_\_\_\_

Salary-Vice President/Bank Manager, United Community Bank, 1406 N Main St, Sturgis KY  
42459

Interest income from savings & Certificates United Community Bank, Sturgis KY and also from  
Integra Bank, NA, P.O. Box 307 Sturgis KY 42459

Dividend Income-Integra Bank NA Evansville IN 47705

Positions of a fiduciary nature in a business None

A designation as commercial, residential, or rural, and the location of all real property other than the filer's primary residence, in which there is an interest of \$10,000 or more held by the filer, filer's spouse, or filer's minor children

<u>Commercial-Arnold Chiropractic Center</u>	<u>Sturgis</u>	<u>joint</u>
<u>Commercial-Hillcrest Orchard &amp; Farm</u>	<u>Sturgis</u>	<u>joint</u>
<u>Commercial-U-STOR-IT Rental Units</u>	<u>Sturgis</u>	<u>joint</u>
<u>Residential/Commercial property-4<sup>th</sup> &amp; 5<sup>th</sup> Sts.</u>	<u>Sturgis</u>	<u>joint</u>
<u>Rural-land in Union and Webster Counties</u>	<u>KY</u>	<u>joint</u>
<u>Rural-land on Hwy 60 West</u>	<u>Sturgis</u>	<u>joint</u>
<u>Rural-land in Wayne County,</u>	<u>West Virginia</u>	<u>joint</u>

Sources of gifts of money or property with a retail value of more than \$200 to the filer or the filer's immediate family, except those from a member of the filer's family. (Family means spouse, parent, sibling, child, mother-in-law, father-in-law, son-in-law, daughter-in-law, grandparent, or grandchild. Immediate family means unemancipated child residing in an individual's household, spouse, or a person claimed by the filer's spouse as a dependent for tax purposes.) N/A

The name of any creditor owed more than \$10,000 except debts arising from the purchase of consumer goods. (Goods used or bought for use primarily for personal, family, or household purposes)

United Community Bank of West Kentucky, Sturgis KY

Integra Bank NA, Sturgis KY

The name of any legislative agent who is:

1. A member of the filer's immediate family;
2. A partner of the filer, or a partner of a member of the filer's immediate family;
3. An officer or director of the filer's employer;
4. An employer of the filer or an employer of a member of the filer's immediate family;
5. A business associate of the filer or a business associate of a member of the filer's immediate family

None

The names of any of the filer's clients who are legislative agents or employers \_\_\_\_\_

None

If you have held a professional license during the filing period, has a properly licensed partner of yours engaged in the practice of cases or other matters which you are prohibited from practicing under KRS 6.744? ☐ Yes ☐ No ☒ Not Applicable

If yes, list the names of the clients represented and list the agencies before which the partner made an appearance. The filer need not identify which client was represented before a specific agency.

Clients

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State Agency

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NOTICES

1. Upon receipt by the Commission, a statement of financial disclosure shall be a public record available for copying.
2. Any person who fails to file a statement of financial disclosure or who fails to remedy a deficiency identified by the Commission in a timely manner may be fined an amount not to exceed \$100 per day up to a maximum total fine of \$1000.
3. Any person who files a statement of financial interests which they know to contain false information, or to omit required information, shall be guilty of a class A misdemeanor.

2/7/05  
Date

John A. [Signature]  
Filer

Send completed statements to:

The Kentucky Legislative Ethics Commission  
22 Mill Creek Park  
Frankfort, Kentucky 40601

If you have questions please call us at (502) 573-2863.